

Name of Person Filing John E. Leland	File Number U-
--------------------------------------	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business(1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or(2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name IBC Corporation Thrift Store division</p> <p>Trade name, if any</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 2801 S Towne Avenue</p> <p>City Pomona</p> <p>State California ZIP Code 91766</p>	<p>9. Business deals with</p> <p style="text-align: center;">a. Labor Organization <input checked="" type="checkbox"/> X</p> <p style="text-align: center;">b. Trust</p> <p style="text-align: center;">c. Employer</p>
<p>10. If 9 b. or 9 c. is checked give trust or employer's name</p> <p>Name</p> <p>Trade name, if any</p> <p>P O Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11. a. Nature of such dealing.</p> <p style="text-align: center;">Company requested meeting</p>
	<p>11. b. Approximate dollar value of such dealing. \$10.00</p>
	<p>12. a. Nature of interest held or income received.</p> <p style="text-align: center;">Luncheon meeting with IBC management to discuss reduction of hours. (Company paid for lunch)</p>
	<p>12. b. Amount \$10.00</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13. a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade name, if any</p> <p>P O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14. a. Nature of payment.</p>
<p>13. b. Is the Business an Employer or Consultant ?</p>	<p>14. b. Amount of payment.</p>